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7590

04/07/2004

Paul J. Maginot
 Maginot, Moore & Bowman
 Bank One Center/Tower
 111 Monument Circle, Suite 3000
 Indianapolis, IN 46204-5115

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Paul J. Maginot	(Depositor's name)
<i>Paul J. Maginot</i>	(Signature)
July 2, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/056,909	01/25/2002	Thomas S. Camino	1672-0099 (DEP-688)	3044

TITLE OF INVENTION: SPACER ASSEMBLY FOR USE IN SPINAL SURGERIES HAVING END CAP WHICH INCLUDES SERRATED SURFACE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/07/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PRIDDY, MICHAEL B	3732	623-017160

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Maginot
 2 Moore
 3 & Beck

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

DePuy AcroMed, Inc.

Raynham, MA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☐ Advance Order - # of Copies _____

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(Date)

Paul J. Maginot

July 2, 2004

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01 FC:1501
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TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:)	MMB Docket No. 1672-0099
)	
Camino et al.)	J&J Reference: DEP 688
)	
Serial No. 10/056,909)	Group Art Unit: 3732
)	
Filed: January 25, 2002)	Examiner: Michael B. Priddy
)	
Title: Spacer Assembly for Use in Spinal)	
Surgeries Having End Cap Which)	
Includes Serrated Surfaces)	

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 2, 2004
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Paul J. Maginot

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July 2, 2004

Date of Signature

LETTER

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed please find a completed Issue Fee Transmittal in connection with the above-identified patent application. Our check for \$1,630.00 is enclosed to cover the cost of the issue fee (\$1,330.00) and the publication fee (\$300.00).

Commissioner for Patents

July 2, 2004

Page 2 of 2

Please charge any fee deficiency or credit any overpayment to Deposit Account
No. 13-0014.

Respectfully submitted,

MAGINOT, MOORE & BECK LLP

A handwritten signature in black ink, appearing to read "Paul J. Maginot", with a stylized flourish at the end.

Paul J. Maginot

Attorney for Applicants

Registration No. 34,984

July 2, 2004

Maginot, Moore & Beck LLP

Bank One Center/Tower

111 Monument Circle, Suite 3000

Indianapolis, Indiana 46204-5115

(317) 638-2922 telephone

(317) 638-2139 facsimile